

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2009		Application Number Patent#: 7,282,240	Filing Date Issued: October 16, 2007
		First Named Inventor Rebecca J. Jackman	Examiner Name F. J. Parker
		Art Unit 1792	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No. H0498.70085US00	
TOTAL AMOUNT OF PAYMENT	(\$) 100.00		

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Deposit Account	<input checked="" type="checkbox"/> Credit Card Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES		
Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims - or HP = _____ x _____ = _____ HP = highest number of total claims paid for, if greater than 20.	Extra Claims Fee (\$) _____ Fee Paid (\$) _____	Multiple Dependent Claims Fee (\$) _____ Fee Paid (\$) _____
Indep. Claims - or HP = _____ x _____ = _____ HP = highest number of independent claims paid for, if greater than 3.	Extra Claims Fee (\$) _____ Fee Paid (\$) _____	

3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
_____	_____	_____	_____
_____ - 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____			Fee Paid (\$)

4. OTHER FEE(S)		Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): 1811 Certificate of correction		100.00

SUBMITTED BY			
Signature 	Registration No. (Attorney/Agent) 36,628	Telephone 617.646.8000	
Name (Print/Type) Timothy J. Oyer, Ph.D.	Date 02/03/10		

Certificate of Electronic Filing Under 37 CFR 1.8	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: 2/3/10	Signature: (Angela M. Griffith)